PATENT Attorney Docket No.: CSI-2012

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFIICATE OF MAI	LING BY "FIRST CLASS MAIL"
I hereby certify that this paper and the accompanying docum first class mail in an envelope addressed to: Compassioner	
In re Application of: Nguyen, et al. Serial No.: 09/686,729 Filing Date: October 10, 2000 Title: MINIMALLY INVASIVE ANNULOPLASTY PROCEDURE AND APPARATUS	Examiner: A. Hoey Group Art Unit: 3765
TRAM	NSMITTAL
Commissioner for Patents Alexandria, VA 22313 Sir:	RECEIVE SEP 17 2003 TECHNOLOGY CENTER R3
 Fee Transmittal (1 pg) Petition for Extension of Time Response to Restriction (2 pgs) A check in the amount of \$985 a. Five month extension Return Post Card 	(2 pgs)
[] Authorization to charge the this sheet is enclosed.	is provided on the A duplicate copy of
•	uthorized to charge any fees required by this t No. 50-1947 referencing Attorney Docket No. *. is enclosed.

[X] The Commissioner is hereby authorized to charge any <u>additional</u> fees which may be required, or credit any <u>overpayment</u>, to Deposit Account No. <u>50-1947</u>, referencing Attorney Docket No. <u>CSI-2012</u>.

Respectfully submitted,

Date: September 9, 2003

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Reg. No. 32,818

Attorney for Applicant

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September 9, 2003

fer the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Compl te if Known **FEE TRANSMITTAL** Application Number 09/686,729 for FY 2003 October 10, 2000 Filing Date First Named Inventor J hn Nguy n Examiner Name A. Hoey Effective 01/01/2003. Patent fees are subject to annual revision. 3765 Art Unit Applicant claims small entity status. See 37 CFR 1.27 CSI-2012 Attorney Docket No. (\$) 985.00 TOTAL AMOUNT OF PAYMENT T FEE CALCULATION (continued) METHOD OF PAYMENT (check all that apply) □ Check □ Credit Card □ Money Order □ Other □ None **ADDITIONAL FEES** Small Large **Entity** Deposit Account: **Entity** Fee Fee Fee Paid Fee Description Deposit Account Number 50-1947 (\$) Code (\$) Deposit Account Name LAW OFFICE OF HARRY J. MACEY Surcharge - late filing fee or oath 65 1051 130 2051 The Commissioner authorized to: (check all that apply) Surcharge - late provisional filing fee or 1052 50 2052 25 ☐ Charge fees indicated below ☐ Credit any overpayments cover sheet Charge any additional fee(s) during the pendency of this 130 Non-English specification 1053 130 1053 1812 2,520 For filing a request for ex parte reexamination 812 2.520 Charge fees indicated below, except for the filing fee to the above-identified deposit account. Requesting publication of SIR prior to 1804 9201 1804 Examination action **FEE CALCULATION** 1,840* 1805 1,840*Requesting publication of SIR after 1805 **BASIC FILING FEE** Large **Entity Small Entity** 2251 Extension for reply within first month 1251 110 55 Fee Fee **Fee Description** Fee Paid 410 2252 Extension for reply within second month 252 205 Code (\$) Code (\$) 1001 750 2001 375 Utility filing fee 1253 930 2253 Extension for reply within third month 465 2002 165 Design filing fee 1,450 1002 330 254 2254 725 Extension for reply within fourth month Plant filing fee 1003 520 2003 260 255 1,970 2255 Extension for reply within fifth month 985 00 985 2004 375 Reissue filing fee 1004 750 401 320 2401 160 Notice of Appeal 1005 2005 80 Provisional filing fee 160 1402 320 2402 160 Filing a brief in support of an appeal 1403 280 2403 Request for oral hearing 140 SUBTOTAL (1) 1451 1,510 1451 1.510 Petition to institute a public use proceeding 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Petition to revive - unavoidable 1452 110 2452 55 Fee from Petition to revive - unintentional 1453 1.300 2453 650 Fee Paid **Extra Claims** below 2501 1501 1,300 650 Utility issue fee (or reissue) Total Claims -20** = = 1502 470 2502 235 Design issue fee Indep. 3** = 1503 2503 Plant issue fee 630 315 Petitions to the Commissioner 1406 1460 Multiple Dependent 130 130 Processing fee under 37 CFR 1.17(q) 1807 50 1807 50 Smail Entity Entity Large 1806 180 1806 180 Submission of Information Disclosure Stmt Fee Fee Description Fee Fee Fee Recording each patent assignment per 8021 40 8021 40 Code Code (\$) (\$) property (times number of properties) Claims in excess of 20 1202 2202 2809 Filing a submission after final rejection 1809 750 375 42 Independent claims in excess of 3 1201 84 2201 (37 ČFR § 1.129(a)) For each additional invention to be 1810 750 2810 1203 2203 140 Multiple dependent claim, if not paid 280 examined (37 CFR § 1.129(b)) 1204 2204 ** Reissue independent claims 1801 750 2801 375 Request for Continued Examination (RCE) 84 42 over original patent 1802 900 1802 900 Request for expedited examination of a design application 1205 2205 Reissue claims in excess of 20 18 9 and over original patent Other fee (specify) SUBTOTAL (2) \$ or number previously paid, if greater; For Reissues, see above. SUBTOTAL (3) (\$) 985.00 Reduced by Basic Filing Fee Paid Complete (if applicable) SUBMITTED BY Reaistration No. (Attorney/Agent) 32,818 Telephone (650) 654-9555 Name (Print/Type)

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